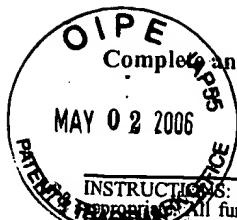


05-03-06

Express Mail Mailing Label No. EV 688845828 US  
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or **Fax** (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

02/27/2006

JACOBSON HOLMAN  
LAW OFFICES  
PROFESSIONAL LIMITED LIABILITY COMPANY  
400 SEVENTH STREET, N. W.  
WASHINGTON, DC 20004

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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/901,473	07/10/2001	William Michael Raike	P66409US1	5642

TITLE OF INVENTION: ENCRYPTED MEDIA KEY MANAGEMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	05/30/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DERWICH, KRISTIN M	2132	380-277000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 \_\_\_\_\_  
2 Goodwin Procter, LLP  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

RPK New Zealand Limited

Auckland, NEW ZEALAND

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Joel E. Lehrer

Date May 2, 2006

Typed or printed name

Joel E. Lehrer

Registration No. 56,401

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL  
FORM

Application Serial Number	09/901,473
Filing Date	July 10, 2001
First Named Inventor	Raike
Group Art Unit	2132
Examiner Name	Derwich, Kristin M.
Attorney Docket No.	SMD-001
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> PTOL-85 Part B Fee(s) Transmittal Form<br><input checked="" type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form  | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application  | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences |
| <input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] | <input type="checkbox"/> Formal Drawing(s)  | <input type="checkbox"/> Appeal Brief (in triplicate)                                  |
| <input type="checkbox"/> Petition for Extension of Time  | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal  | <input type="checkbox"/> Status Inquiry  |
| <input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations  | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)   | <input checked="" type="checkbox"/> Return Receipt Postcard                            |
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| <input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above  | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application                        | <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8     |
|  | <input type="checkbox"/> Small Entity Statement   | <input type="checkbox"/> Additional Enclosure(s) (please identify below)               |
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|  | <input type="checkbox"/> Amendment After Allowance  |  |
|  | <input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate) |  |

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
Goodwin Procter LLP  
Exchange Place  
Boston, MA 02109  
Tel. No.: (617) 570-1000  
Fax No.: (617) 523-1231  
Customer No. 051414

## SIGNATURE BLOCK

Respectfully submitted,  
  
Date: May 2, 2006  
Reg. No. 56,401  
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